

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

AB APPROVAL OMB NUMBER: Paroires:

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SEC USE ONLY

DATE RECEIVED

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Pertin

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

( check if this is an amendment and name has changed, and indicate change.) Limited Parinership Interests of Footprint Ventures, L.P. PECEMEN Filing Under (Check box(es) that apply): ☐ Rule 304 D Rate 505 2 Ruie 506 ☐ Section 4(6) ULOR Type of Filing: Mew Filing Amendment A. BASIC IDENTIFICATION DATA <u>2 c 2007</u> AHC Enter the information requested about the issuer Name of Insper ( check if this is an amendment and name has changed, and indicate change.) Footprint Ventures, L.P. (Number and Street, City, State, Zip Code) Address of Executive Officers Telephone Number (Including Area Code) cio Straria Corporate Services Ltd., P.O. Box 2519GT, Grand Cayman KYI-1104 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)

Brief Description of Business

(if different from Executive Offices)

Investment Partnership

Type of Business Organization

☐ corporation

business trust

Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: FN

Month Year 42 06

limited partnership, already formed

limited partnership, to be formed

other (please specify):

<del>Mozmoht</del> FINANCIAL

PROCESSED

SEP 0 5 2007

CN for Creeds; FN for other foreign jurisdiction)

### GENERAL INSTRUCTIONS

Who Mart File: All issues making an offering of securities is reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 13 U.S.C. 77d(6).

When To File A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to the address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this actics must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed eigenforce.

Information Required: A new filing must contain all information requested. Amendments need only report the same of the inner and effering, any changes therein, the information requested in Part C, and any material changes from the information proviously amplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing For: There is no federal filing for.

This notice shall be used to indicate reliance on the Uniform Limited Officing Examption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Because relying on ULGE must file a superstanding throughout (ULGE) are for exemption and that have adopted this form. Because relying on ULGE must file a superstanding solice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fire as a precondition to the claims for the exemption, a fee in the proper amount shall accompany this form. This notice that be filed in the appropriate states in accordance with state how. The Appendix to the notice constitutes a part of this notice and count be campleted.

## ATTENTION

Failure to file notice to the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal molice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

8EC 1972 (5-05)

Persons who remend to the collection of information contained in this deem are not required to respond unless the form displays a currently vesid OMB control number.

1 OF 9

<ol><li>Enter the i</li></ol>	nformation requested for	the following:
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- Bach promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issper,
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers, and

town group of	an margagin	tines or hymestrith manera:			
Check Box(ex) that Apply:	☐ Promoter	☐ Beneficial Owner	C Executive Officer	☐ Director	General and/or     Managing Partner
Full Name (Last same first, it	f individual)			.,	
Footprint Ventures GP (C	<u> </u>		·		
Business or Residence Addre	ess (Number and 8	troet, City, State, Zip Code)			
clo Staurts Corporate Ser	vices Ltd., P.O.	Box 2510GT, Grand Cay	yunun KY1-1104		
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	☐ Bxscative Officer	E Director (of General Partner)	☐ General and/or Managing Partner
Pull Name (Last name first, i	f individual)				
Brownstein, Neill H.					
Butiness or Residence Addre	ess (Number and S	treet, City, State, Zip Code)			<del></del>
536 West Crescent Drive,	•				
Check Bax(es) that Apply:	C Promoter	C Bearficial Owner	Brecutive Officer	Director (of     General Partner)	General and/or Managing Partner
Poli Name (Last name first, i	f individual)				
Brownstein, Linda S.					
Business or Residence Addres	esa (Namber and S	treet, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		<del></del>
536 West Creacent Drive,	Palo Alto, Cali	loruta 94301			
Check Box(es) that Apply:	C) Promoter	C Bearficial Owner	D Executive Officer	□ Director	General and/or     Managing Partner
Puli Name (Last some first, i	f individual)				
Business or Residence Addr	ess (Number and S	treet, City, State, Zip Code)			
Check Box(es) that Apply:	C Promoter	[3] Beaclicial Owner	Basestive Officer	[] Director	General and/or Museging Partner
Pail Name (Lest some first, i	if individual)				
Business or Residence Addr	es (Number and S	tract City State Zip Code)	<del></del>	<del></del>	
Check Box(ex) that Apply:	D Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or     Managing Partner
Pall Name (Last same first, i	if individual)				
Business or Residence Addr	ess (Number and t	Sirect, City, State, Zip Code)			· · · · · · · · · · · · · · · · · · ·
Check Box(ex) that Apply:	CJ Promoter	Beneficial Owner	☐ Rucative Officer	Cl Director	General and/or Managing Partner
Pell Name (Last game first,	f individual)				
Butiness or Residence Addr	ess (Number sad t	Rrest, City, State, Zip Code)			, , , , , , , , , , , , , , , , , , ,
Check Best(es) that Apply:	C Promoter	Beneficial Owner	☐ Recetive Officer	D Director	General and/or Managing Partner
Pull Name (Last same first,	if individual)				
Business or Residence Addr	ess (Number and S	Struct, City, State, Zip Code	)		
		<del></del>		<del></del>	

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						( o ( ) ( )							
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-eccredited investors in this offering?										Yes	No	
Answer size in Appendix, Column 2, if filing under ULOR.											0	Ø	
2. What is the minimum investment that will be accepted from any individual?  "The General Partner in its discretion may accept leaver amounts.											\$ 1,400	1,000	
	"The General Partner in its discretion may accept lessur amounts.												
3.	Does the offering permit joint ownership of a single unit?										Yes Ø	No El	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar reaumeration for solication of purchasers in connection with sales of securities in the offering. If a person to be listed is											124	u
	similar rea	uneration C	ar solication	a of parches	ers is compe	ction with s	ales of escur	ities in the c with a state	offerine. If a	person to b	e listed is		
	proper or o	leater. If ou	ore then five oker or deal	: (5) per <del>sons</del>	to be listed	ers traocis	ted persons	of such a bro	ker or deal	и, уов вшу	set forth the		
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<del></del>						<del> </del>							
Busines	s or Residen	to Address (	Number and	Street, City	r, State, Zep	Code)							
Naste o	f Associated	Broker or D	ezler			···········		<del></del>	<del></del>	<del></del>		···	
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	MT	MB	NV	NH	<b>M</b> 7	MM	MY	иc	ND	ОН	OK	OR	PA
	RI	sc	SD	TN	ĪΧ	<del>ঢা</del>	VI	VA	WA	wv	WI	WY	PR
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Burines	s or Residen	n Address (	Number and	l Street, City	, State, Zip	Code)							
Name o	f Associated	Broker or D	ealer										
Stutes i	which Pers	on Listed H	n Solicited	or Intends t	8 Solicit Par	chasers		<u></u>	<del></del>				
	(Check *A	il States" or	r check indi	ridad States	·)			<del></del>	<i></i>			☐ All 8	States
	AL	AK	AZ	AR	CA	CO	CT	DB	DС	PL	GA	HI	TD.
	TL.	DN	IA	KS	EY	LA	MB	<b>60</b>	WA	MI	MN	MS	KO
	¥T	MB	NV	MH	M	MAG	NY	ЖC	ИD	ОН	OX	OR	PA
	M	<b>SC</b>	SD	TN	TX	ण	VT	VA	WA	WV	WI	WY	PR
Pull Na	no (Lest me	e first, if in	dividuel)										
Rusine	s or Residen	ce Address	(Number see	d Street, Cit	v. State. Zin	Code)					· · · · · · · · · · · · · · · · · · ·		
			<b>V</b>		,,								
Name o	Associated	Broker år I	ealer										
States i	a Which Pers	on Listed H	as Solicited	or Intends #	o Solicit Pu	chasers		<del></del>				·	
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(Use black elect, or copy and use additional copies of fitie sheet, as necessary.)

	C. CHECHOGOPHICE SUMMER DE ANCHENOUS EXPRISES COLUMN NAME	n may		
sold. box i	the aggregate offering price of securities included in this offering and the total amount already Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this  and indicate in the columns below the amounts of the securities offered for exchange and already anged.			
7	Types of Security	Aggrega Offering P		Amount Already Sold
I	)ebt	S		<b>s</b>
E	quity	\$		\$
	☐ Common ☐ Preferred		_	
(	Convertible Securities (including warrants)	s	_	s
I	Partnership Interests	\$ 150,000	000	\$ 14.850,000
(	Other (Specify)	\$	_	\$
	Total	\$ 150,000	000	\$ 14,850,060
	Answer also in Appendix, Column 3, if filing under ULOR.			
ශ්රිස ගැන්	r the number of accredited and non-accredited investors who have purchased securities in this ing and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the per of persons who have purchased securities and the aggregate dollar amount of their purchases on otal lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Numbe	-	Dollar Amount of Purchases
1	Accredited Investors	15	-	\$ <u>14,850,000</u>
1	Non-accredited Investors		-	3
	Total (for filings under Rule 504 only)		_	<b>S</b>
	Answer also in Appendix, Column 4, if filing under ULOE.			
sold	is filing is for an offering under Rule 504 or 505, enter the information requested for all securities by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first of securities in this offering. Classify securities by type listed in Part C – Question 1.			
		Туре	1	Dollar
•	Type of Officing NOT APPLICABLE	Securit	y	Amount Sold
1	Rate 505		-	<b>s</b>
1	Regulation A		-	5
1	Rule 504		_	\$
	Total		-	<b>S</b>
in ti info	Partish a statement of all expenses in connection with the issuance and distribution of the securities his offering. Exclude amounts relating solely to organization expenses of the insurer. The mation may be given as subject to future contingencies. If the amount of an expenditure is not an estimate and check the box to the left of the estimate.			
	Trensfer Agent's Fees	**********	0	<b>\$</b>
1	Printing and Engraving Costs	****	E	\$500
1	Legal Fees	-	19	\$_10,000
	Accounting Fees	*********		\$
1	Bogineering Fees			<b>s</b>
:	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify) (Travel, lodging)		<b>3</b>	\$ 20,000
	Total		12	\$ 30,500

	a Browning online an			
	- Question 1 and total expenses furnished	egate offering price given in response to Part C l in response to Part C – Question 4.a. This to the issuer."		\$ <u>149.969.500</u>
5.	be used for each of the purposes shown.  furnish an estimate and check the box to t	I gross proceed to the issuer used or proposed to If the amount for any purpose is not known, he left of the estimate. The total of the ross proceeds to the issuer set forth in response		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	**************************************	□ \$	C) \$
	Purchase of real estate	)	O\$	O \$
	Purchase, rental or leasing and installation	n of machinery	CI \$	<b>= \$</b>
	Construction or leasing of plant buildings	and facilities	D\$	<b></b>
	Acquisition of other businesses (including offering that may be used in exchange for	the assets or securities of another		
			□ <b>s</b>	□ \$
	Repayment of indebtedness	······································	O \$	<b></b>
	Working capital (organizational and op-	erating expenses)	D \$	□ \$ <u>4,069,500</u>
	Other (specify): Investment in accorda	nce with the Fund's objectives	□\$	□ \$ <u>145,000.000</u>
		***************************************	<b>#</b> \$	□\$
	Column Totals	01 Philade <sup>a -</sup> Trop <del>a (01 010 17) 177 Pro</del> (18 074 014 477 T 000 000 001 14 TTO 100 000 001 14 TTO 100 000 000 000 000 000 000 000 000 00	D\$	□ \$ <u>149.069.500</u>
	Total Payments Listed (column totals add	led)	D\$_16	9.069.500
follow	mer has duly caused this notice to be signed ing signature constitutes an undertaking by	by the undersigned duly authorized person. If the the issuer to formish to the U.S. Securities and Example investor pursuant to	change Commissio	n, upon written
Issuer	(Print or Type)	ignature	Date	_
	_	Mund	August Z	> , <b>2007</b>
Name	as general partner of Signer (Print or Type)	Sitle of Signer (Print or Type)		
	I. Brownstein	Sitle of Signer (Print or Type) Svound Ze	حہ	
		/		
<u> </u>		A STEP STATE		
	Intentional misstatements or omi	ATTENTION ssions of fact constitute federal criminal violations. (i	See 18 U.S.C. 1001.)	

		S. R. SHADESUS NATION.								
1.	Is any party described in 17 CFR 230.2 provision of such rule?	Yes No								
	See Appendix	Column 5, for state response.								
2.	The undersigned issuer hereby undertanotice on Form D (17 CFR 239.500) at	kes to furnish to any state administrator of any state in t such times as required by state law.	which this notice is filed a							
3.	The undersigned issuer hereby undertaby the issuer to offerees.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	Uniform limited Offering Exemption (	the issuer is familiar with the conditions that must be so ULOE) of the sate in which this notice is filed and unde he burden of establishing that these conditions have bee	rstands that the issuer claiming							
	er has read this notification and knows gned duly authorized person.	the contents to be true and has duly caused this notice t	o be signed on its behalf by the							
leruer (	Print or Type)	Signature	Date							
FOOTP	RINT VENTURES, L.P.	110	August 23 , 2007							
by Foo	tprint Ventures GP (Cayman) Ltd.	and	1							
	s general partner		Į							
Name (	Print or Type)	Title (Print or Type)	<del></del>							
Nell H.	Brownstein	Director								

buttruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

					, and the state of	PAUDE 2						
1	Intend t non-act	Type of Security and aggregate offering price offered in state (Part B-Rem 1) (Part C-Rem 1)		Type of investor and amount purchased in State (Part C-Rem 2)								
State	Yes	No	\$150,0 Lim Partne Inter	ited :rship	Number of Accredited Investors	Accredited Non-Accredited						
AL		<u> </u>										
AK			<del></del>									
AZ					·							
AR	<u> </u>											
CA		x	•	«	7	\$8,250,000						
со						<u></u>						
СТ	<u> </u>	×	4	•	1	\$1,000,000		<u> </u>	<u></u>			
DE		х	-	<b>24</b>	4	\$1,600,000						
DC												
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MD		x	•		1	\$500,000	ļ	<u> </u>		ļ		
MA	<u> </u>	x	•	•	2	\$1,500,000		<u> </u>		<u> </u>		
МІ	ļ	<b> </b>					ļ	<del> </del>	ļ	<b>_</b>		
MN	<u>L</u> _							<u></u>	<u></u>			

					BREDIE					
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	Intend to non-acci investors (Part B-	redited in State	Type of Security and aggregate offering price offered in state (Part C-Rem 1)		Type of i amount pure (Part 6	investor and chased in State C-Item 2)		Disqualification under State ULOB (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	\$150,000,000 Limited Partnership Interests	Number of Accredited Investors	· Accredited Non-Accredited					
MS										
МО										
MT										
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NV					_					
NH										
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NY		x	a a	1	\$2,000,000					
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wv		<u></u>				<u> </u>		<u> </u>	<u></u>	

1	7	?	3		4					
	non-eco investors	Type of Security and aggregate on-accredited vestors in State Part B-Rem 1)  Type of Security and aggregate offering price offered in state (Part C-Rem 1)  Type of investor and amount purchased in State (Part C-Rem 2)						Disquali under Stat (if yes, explana waiver g (Part E-	te ULO) attach tion of ranted)	
State	Yes	No	\$150,000,000 Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WI										
WY										
PR	<u> </u>									

